ABSTRACT

Introduction: The diploma thesis focuses on the issue of nutritional support for patients after a stroke.

Aims: In the theoretical part, the characteristics of ischemic stroke (iCMP) and hemorrhagic stroke (hCMP) were described. Subsequently, risk factors and prevention of stroke were described. The last part of the theory dealt with nutrition and procedures for introducing different types of diets and enteral nutrition in patients after a stroke. The aim of the practical part was to monitor the procedure during the nutrition consultation in patients who have recently experienced one of the events (iCMP or hCMP).

Methods: Data for the thesis were obtained at the Neurological Clinic of the 1st Faculty of Medicine of the Charles University and VFN in Prague from February to April 2023. Various nutritional support was retrospectively monitored in patients who experienced an ischemic stroke and a hemorrhagic stroke. The duration of hospitalization, height, weight, BMI, age and associated diseases were also determined for the patients. Data processing and statistical evaluation was done in Microsoft Excel.

Results: The study compared different types of nutritional support in 51 patients who were hospitalized in one intensive care unit and three standard wards. Most patients (49%) were only prescribed a diet throughout their hospitalization. 51% of patients then had to be nourished by one of eight possible combinations of enteral nutrition, parenteral nutrition, sipping and diet. It can be read from the results that patients who experienced a hemorrhagic stroke were clinically worse than patients who experienced an ischemic stroke. Patients with hCMP spent 41.5% longer in the intensive care unit (20.8 days versus 14.7 days). Fewer patients with hCMP were satisfied with diet alone (40% versus 51.2%). Enteral nutrition was required by 40% of patients with hCMP versus 22.0% with iCMP. The most striking difference was in patients who had to have a PEG inserted. 30% of patients with hCMP had a PEG inserted, while only 9.8% patients with iCMP needed it.

Conclusion: Based on the obtained results, it can be said that patients who have had a hemorrhagic stroke have a worse course of hospitalization. It is very important to have a team of experts involved in the treatment of the patient. With regard to the nutritional status of patients at the neurological clinic, a nutritional therapist, together with a clinical speech therapist and, of course, a doctor, plays a crucial role.

Key words: stroke, dysphagia, nutrition, malnutrition screening, enteral nutrition